Village of Cambridge
Application for Employment
We Are an Equal Opportunity Employer

NOTICE: Application must be typewritten or clearly printed in ink. All questions must be answered, if applicable. If not, indicate NA (not applicable). Applications which are incomplete or illegible will not be considered. If space provided is insufficient for complete answers or you wish to furnish additional information, attach sheets of the same size as this application and number answers to correspond with questions.

1. PERSONAL INFORMATION

Name in Full (Last, First, Middle)			Social Security Number
Address (Apartment, Street, P.O. Box)			Home Telephone Number ( )
City	State	Zip Code	Work Telephone Number ( )

Are you over the age of 18? ☐ Yes ☐ No

Are you a United States citizen? ☐ Yes ☐ No

Do you have a valid Wisconsin driver's license? ☐ Yes ☐ No

Do you have a valid driver's license from another state? ☐ Yes ☐ No

Have you ever been convicted of a felony? ☐ Yes ☐ No
If yes, please attach a separate sheet giving full information.

2. EDUCATION

Name of School	Location	Dates From	Dates To	Course Pursued	Degree, Diploma, or Credits Earned
High Schools					
College					
Graduate School					

List any scholarships, apprenticeships, licenses, certifications, membership in professional organizations or other information you believe should be considered in evaluating your qualifications.

_____

_____

_____

POSITION APPLIED FOR: _____ DATE OF APPLICATION: _____

3. EMPLOYMENT

Begin with current or most recent employer. List chronologically all employment, including summer and part-time employment while attending school. All time must be accounted for. If unemployed for a period, provide dates. To furnish additional employment information, attach sheets of the same size and format as this application.

Name and Address of Employer	Dates	Position and Kind of Work
Name _____ Street _____ City, State _____ Supervisor's Name/Telephone: _____ May we contact the employer/supervisor? ☐ Yes ☐ No	From To Full-Time ☐ Part-Time ☐ Annual Salary/Wages:	Reason for Leaving
Name _____ Street _____ City, State _____ Supervisor's Name/Telephone: _____ May we contact the employer/supervisor? ☐ Yes ☐ No	From To Full-Time ☐ Part-Time ☐ Annual Salary/Wages:	Reason for Leaving
Name _____ Street _____ City, State _____ Supervisor's Name/Telephone: _____ May we contact the employer/supervisor? ☐ Yes ☐ No	From To Full-Time ☐ Part-Time ☐ Annual Salary/Wages:	Reason for Leaving
Name _____ Street _____ City, State _____ Supervisor's Name/Telephone: _____ May we contact the employer/supervisor? ☐ Yes ☐ No	From To Full-Time ☐ Part-Time ☐ Annual Salary/Wages:	Reason for Leaving

4. MILITARY SERVICE

Branch of Service	Month/Year Served From	To	Active Duty or Reserve	Highest Grade	Skill Specialty or Primary Duty

List special schools attended/skills acquired during military service.

_____

_____

_____

_____

5. REFERENCES

Give three references (not relatives, or present employer; avoid listing members of the clergy).

Name	Number of Years Acquainted
Address _____ City/State/Zip _____ Telephone Number ( ) _____	Position/Title/Profession
Name	**Number of Years Acquainted**
Address _____ City/State/Zip _____ Telephone Number ( ) _____	Position/Title/Profession
Name	**Number of Years Acquainted**
Address _____ City/State/Zip _____ Telephone Number ( ) _____	Position/Title/Profession

6. GENERAL

COMPLETE IF INSTRUCTED TO DO SO BY EMPLOYING AGENCY.

For questions A-C, attach no more than one additional page for each answer.

A. Why have you chosen to apply for this position?

B. Discuss things you have done which have contributed to your life experience. Remember to include information regarding volunteer work with civic, school, or professional organizations. Be specific about names and dates.

C. Why do you believe you could relate to and/or work with people of different races, sexes, cultures, ages, socio-economic groups, and educational levels?

APPLICANT PLEASE READ CAREFULLY AND SIGN BELOW

Information provided and statements made as part of this application may be grounds for not employing you or for dismissing you after you begin work. All information provided and statements made are subject to verification.

CERTIFICATION

ALL INFORMATION PROVIDED AND STATEMENTS MADE BY ME AS PART OF THIS APPLICATION, OR AS PART OF ANY ADDITIONAL INFORMATION PROVIDED IN SUPPORT OF THIS APPLICATION, ARE COMPLETE, CORRECT, AND TRUE TO THE BEST OF MY KNOWLEDGE.

I UNDERSTAND THAT IF I AM EMPLOYED, FALSE INFORMATION PROVIDED OR FALSE STATEMENTS MADE AS PART OF THIS APPLICATION MAY BE CONSIDERED AS CAUSE FOR DISMISSAL.

Applicant's signature: _____

Date signed: _____